

YOUR WORKPLACE

Instructions: The questions that follow ask you about your workplace. These are questions about your drinking alcohol and attempts to control it, and how the experiences in your workplace affect that.

If you have worked at more than one place in the past six months, answer the questions for the job you worked at most recently. If you held more than one job at the same time, answer for the job that was most important to you.

1. How many times in the past six months have some of your coworkers gone drinking together off the job? [Coworkers are people you know and work with, not those in other departments or locations that you would only know about but not associate with. This may include your boss, if you would associate with him/her off the job.]

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

2. How many times did you go with them?

- | |
|--------------------------------------|
| 1 <input type="checkbox"/> Always |
| 2 <input type="checkbox"/> Usually |
| 3 <input type="checkbox"/> Sometimes |
| 4 <input type="checkbox"/> Rarely |
| 5 <input type="checkbox"/> Never |

3. How much of the talk at work is about drinking or activities involving drinking?

- | | |
|---------------------------------------------------------|-------------------------------------------------------|
| 0 <input type="checkbox"/> Never talk to others at work | 4 <input type="checkbox"/> A lot of it (26-50%) |
| 1 <input type="checkbox"/> None of it | 5 <input type="checkbox"/> Most of it (More than 50%) |
| 2 <input type="checkbox"/> Only small portion (1-10%) | 6 <input type="checkbox"/> All of it |
| 3 <input type="checkbox"/> Some of it (11-25%) | |

4. In some jobs, you're not supposed to drink during working hours, or on breaks or at lunchtime, but some employees drink anyway. How many times in the past six months have your friends at work done this?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

5. In some jobs you might be expected to drink, for example to celebrate something. How many times has this happened in the past six months?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

6. How many times in the past six months were you absent from work or called in sick because of your drinking problem?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

7. How many times in the past six months have you come in late or left early because of your drinking problem?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

8. How many times in the past six months did you not come in because of your drinking problem even when you knew it was very important that you be there?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

9. How many times in the past six months have you taken longer breaks or lunch hours than you usually do because of your drinking problem?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

10. How many times in the past six months have people there suggested you get treatment for your drinking problem?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

11. How many times in the past six months have people there commented positively when you had not been drinking recently?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

12. How many times in the past six months have people there done something for you to show they approve when you have not been drinking recently?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |

13. How many times in the past six months have you not done your work as well as you usually did because of your drinking problem?

- | | |
|-----------------------------------------------------|-------------------------------------------------------------|
| 1 <input type="checkbox"/> About daily | 5 <input type="checkbox"/> Around once a month |
| 2 <input type="checkbox"/> 2-4 times a week | 6 <input type="checkbox"/> 2-5 times in the past six months |
| 3 <input type="checkbox"/> About once a week | 7 <input type="checkbox"/> Only once in the past six months |
| 4 <input type="checkbox"/> About once every 2 weeks | 8 <input type="checkbox"/> Never |